

Recreation and Community COVID-19 Support Grants

You'll be unable to submit this form if you:

- make a selection that includes 'No' in *Applicant details: Is your organisation incorporated?* (Note : you cannot apply if not incorporated)

Applicant details

Please read guidelines in full before commencing your application

Name of the club/group/organisation applying for the grant Required

Postal address of the club/group/organisation undertaking the project Required

Contact person for the club/group/organisation Required

Phone (Business hours number) Required

Email Required

Is your organisation incorporated? (Note : you cannot apply if not incorporated) (Select 1 or more options)

Required

Yes

No

The information in the field below applies if you made a selection that includes 'No' in *Applicant details: Is your organisation incorporated?*
(Note : you cannot apply if not incorporated)

Your organisation is not eligible for this grant.

Does your organisation have an Australian Business Number (ABN)? (Select 1 or more options) Required

Yes

No

The information in the field below applies if you made a selection that includes 'No' in *Applicant details: Does your organisation have an Australian Business Number (ABN)?*

If you do not have an ABN - You need to complete a 'Statement by Supplier' form and submit it with your application. [Form available from the ATO https://www.ato.gov.au/forms/statement-by-a-supplier-not-quoting-an-abn/](https://www.ato.gov.au/forms/statement-by-a-supplier-not-quoting-an-abn/) Note: Failure to provide either an ABN or statement by supplier will result in Council being obliged to withhold 46.5% of the grant allocation (if successful)

Complete this field if you made a selection that includes 'No' in *Applicant details: Does your organisation have an Australian Business Number (ABN)?*

Attach statement by supplier form



Please attach all files to the end of this form before submitting it.

Complete this field if you made a selection that includes 'Yes' in *Applicant details: Does your organisation have an Australian Business Number (ABN)?*

Your organisation's ABN

Please identify your GST Tax status (Select 1 or more options) Required

Registered for GST

Not registered for GST

Grant Allocation

The Recreation and Community COVID-19 Support Grants are provided to support clubs/organisations who have suffered financial loss or membership/volunteer decline as a result of COVID-19, and to encourage initiatives to reactivate participation in a COVID-19 safe manner.

If your application is approved, a grant will be allocated on the basis of club/organisation membership. An additional allocation may be made to support participation initiatives.

Grant allocation is provided as follows:

<10 member \$200

<20 members \$500

<50 members \$1000

50+ members \$1500

Support participation initiatives – additional \$500

What is your current total club membership? Required

Funding category

Why are you requesting grant funding? (please all relevant category/s) (Select 1 or more options)

- Loss of income related to COVID-19
- Decrease in membership due to COVID-19
- To support COVID hygiene requirements
- To support new initiatives to reactivate participation in a COVID safe manner

Why do you need this grant funding? Required

Are you undertaking any new initiatives to reactivate participation in a COVID safe manner? (Select 1 or more options) Required

- Yes
- No

Complete this field if you made a selection that includes 'Yes' in *Grant Allocation: Are you undertaking any new initiatives to reactivate participation in a COVID safe manner?*

If Yes - please explain the new initiative(s) Required

Authorisation/Funding Agreement

I affirm that:

- I have read the guidelines
- The project is based in the Horsham municipality
- All details supplied in this application and attachments are true and correct to the best of my knowledge
- The application form has been submitted with the full knowledge and agreement of the applicant organisation
- The necessary taxation documents have been provided

If this application is successful, our group agrees to submit a *Project Completion Report*.

If successful payment of grant will be deposited into the following Bank Account:

BSB Number Required

BSB Number

Account No:

Account number

Name of Bank Account:

Chairperson/President Required

Date

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End of form

Don't forget to attach all files before submitting this form